New England Deaconess Hospital

pulse

185 Pilgrim Road, Boston, Massachusetts

March-April 1985

Stat lab provides rapid results for essential tests

"We need that stat!" The words are used when getting information quickly can make the difference in a patient's care. The Pathology Department's stat lab, where immediacy and speed characterize the everyday flow of work, provides certain lab test results in a fraction of the time taken in the main lab.

"The stat lab handles the specimens that need extraordinarily rapid turnaround time," says Benjamin Gerson, M.D., director of clinical chemistry. "These are tests whose outcome influences the immediate management of a patient, when a physician must decide what action to take without waiting for the regular lab turnaround time."

Situations that may require stat tests include samples from the triage unit, where decisions must be made on the management of patients admitted in emergency situations, and specimens taken during surgery that may provide information surgeons need during a procedure.

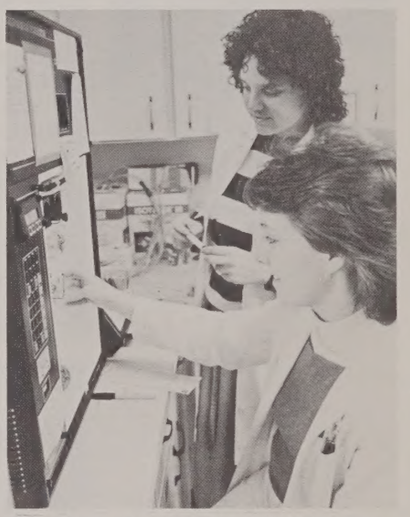
"The stat lab handles ... tests whose outcome influences the immediate management of a patient" — Benjamin Gerson, M.D.

Routine test specimens for the main labs are collected by lab technologists at regular times and delivered to the control center in the Meissner basement, where they are entered into the computer system and routed to the proper lab. With the time involved in transport and processing, it usually takes a couple of hours for results to be available.

Specimens for the stat lab, located on Farr 6, either are brought to the lab or arrive through a system of pneumatic tubes that connect the lab with stations on four other floors in the Farr building. Upon arrival in the lab, specimens are processed immediately, and results are ready in an average turnaround time of about 10 minutes. "There are some lower priority tests that take longer — as much as an hour — but some can be ready in as little as two minutes," says Jean Ahern, M.T. (A.S.C.P.), the group leader who heads the stat lab team.

The physical setup of the stat lab enables rapid turnaround of tests. "The lab was designed by the technologists to suit the work flow," Ahern says. Instruments are arranged so that a specimen can be moved from one to another quickly and efficiently.

For example, specimens taken during open heart surgery are frequently sent for three tests — blood gases, potassium content, and hematocrit (a measure of the percentage volume of blood cells in a sample). When such a specimen arrives in a tube, a portion is placed in the hematocrit instrument, which is right next to the tubes. While that test is running, the potassium and blood gas tests are performed using instruments that are lined up next to the hematocrit. By the time results for the second and third tests are in, the hematocrit is ready, often in as little as five minutes.



Jean Ahern, M.T. (A.S.C.P.), stat lab group leader (foreground) and hematology technologist Sheila Linehan, M.T. (A.S.C.P.), test a new piece of equipment that quickly processes a variety of blood tests.

Results from the stat lab are reported over the regular lab computer system, over the phone, or via the Telautograph, a machine that transmits results to the receiving station as they are being written in the labs.

(continued on page 5)

New home health care subsidiary incorporated

"At the Deaconess, we have a wealth of experience in providing certain types of therapies like infusion chemotherapy and respiratory therapy," says Meg Lahey, staff assistant to the hospital director, "so it is a natural extension for the hospital and the family of corporations under NEDH Corp. to bring that kind of treatment to patients in their homes."

To that end, in December 1984, Deaconess Home Health Care Corporation (DHHCC) was incorporated as a subsidiary of NEDH Corp. The new subsidiary will provide patients with certain home therapies and equipment as a continuation of care begun at the Deaconess. These include hyperalimentation; infusion therapies, such as parenternal and enteral nutrition, continuous infusion chemotherapy, and intravenous antibiotic therapies; respiratory therapy; and durable medical equipment.

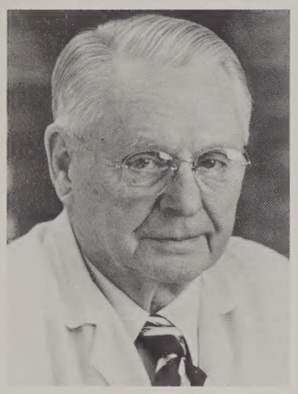
Says Lahey, "Our purpose is to give hospital patients the choice of receiving therapy at home, where they can be with their families and friends."

In the past, home therapy patients were referred by their physician or nurse to an outside home health care company, which arranged and provided home therapy services. DHHCC now will coordinate the services, contracting with a commercial vendor to compound solutions and deliver supplies to the patients. It is hoped that in the near future, DHHCC will begin compounding solutions on its own.

Says Lahey, "Having our own home health care company helps assure a greater quality of care once the patient leaves the hospital." She says the primary benefits to the hospital are that it will ensure that the medical staff's orders are carried out, and it will increase physicians' confidence in providing home therapies. It also allows NEDH Corp. to generate revenue unconstrained by Chapter 372.

Deaconess Home Health Care will be managed by Richard J. Baptista, M.S., R.Ph. Baptista says, "Our intent is to develop a home care operation that provides quality products and comprehensive clinical services in the most cost-efficient manner possible. And, by virtue of its affiliation with NEDH, Deaconess Home Health Care will offer the home patient a continuation of the excellent care received at the Deaconess."

A doctor of philanthropy


Lyman H. Hoyt, M.D.

Medicine is not a nine-to-five job. From the first day of medical school, through residency training and clinical practice, physicians traditionally spend long hours studying, diagnosing, and treating illness and injury. It is a demanding profession, requiring much of a physician's time, effort, and dedication.

There are physicians, however, who take those responsibilities one step further, and Lyman H. Hoyt, M.D., Department of Medicine, is one of them. He has given generously of his spare time and energy to raise money – from patients and from fellow medical staff members – to benefit the hospital and, in turn, to benefit its patients.

In 1973, NEDH formed a Staff Committee for Development (SCD), to direct a staff appeal – a yearly fund-raising drive aimed at the medical staff – and the Trustees appointed Hoyt chairman of this committee.

Roger A. Perry Jr., associate director, says, "Dr. Hoyt was the logical choice to be the first chairman. Long before this committee existed, he was raising money on his own. He simply saw that certain things were needed, and he asked his patients and friends to donate money."

Indeed, when the Farr building was being built, he made a personal campaign to his patients, and they became donors. And, Hoyt says, "They're still doing it. I've had a lot of very fine, very loyal patients who have, in my name, contributed to the hospital."

One of those patients, Audrey Kennedy, was heir to the Kennedy clothing store fortune. The Frederick J. Kennedy Foundation was established to oversee the apportionment of the $20 million inheritance, and the Deaconess physician was one of its directors.

He says, "We did many good things with that money, including a $1.5 million contribution to the Deaconess. In her will, Kennedy left the hospital an additional $500,000." Those funds were used to help construct the School of Nursing building, named for Kennedy; to support the Cancer Research Institute addition; and to purchase furnishings for the Diabetes Treatment Unit. He says, "I enjoyed working for the Foundation. I've always had an interest in finance."

The SCD is comprised of representatives from the Deaconess medical and surgical staffs and the Joslin Diabetes Center, and currently is co-chaired by Hoyt and Ellison Pierce, M.D., chairman of the Department of Anaesthesia. Each year, this group meets to identify a particular piece of equipment needed by the hospital. The goal of the staff appeal is to raise enough money to purchase the equipment.

The Deaconess physician says, "The staff appeal is important for two reasons. First, it helps supply something that the hospital otherwise would not be able to purchase. Second, it creates a sense of responsibility and patriotism among the medical staff; it makes them more responsive to the hospital if they feel they've provided something."

The NEDH staff has been most responsive. In the past, funds raised have been used to purchase monitoring equipment for the Recovery Room and the Intensive Care Units; to buy an electrocardiogram management system; to upgrade and reconstruct the surgical suites. This year, the funds will be used to buy critical care ventilators.

The Deaconess's "Doctor of Philanthropy" has been on the staff since 1929, and his contributions to the hospital have been many. He says, "I suppose chairing the staff appeal takes a lot of time, but I think it's important. I was never out for any honors or privileges; I've done it because I wanted to."

Personnel offers many services for employees

All Deaconess employees encounter the Personnel Department when they first join the hospital, but the department's function goes far beyond the recruitment and placement of new employees. Personnel provides a wide variety of services and benefits that can help employees in both their working and personal lives.

For employees who want to explore possibilities for growth and advancement in the hospital, Personnel takes an active role in employee transfers and promotions and offers career counseling. "Employees are welcome to come and see us even if there isn't a specific job available at the time," says Jane Barry, employment manager. "We can discuss opportunities within the hospital and assist them in pursuing those positions which might be of interest to them."

Courses offered by Personnel's training group also help employees with both personal and professional development.

Dealing with problems that may arise in an employee's job or working situation is an important Personnel function. "The grievance procedure outlined in the employee handbook instructs employees to take their problems to the supervisor, the department head, or the administrative officer in charge of the department, in that order," says director of Personnel Jack Kilkelly. "Personnel is always available to act as an intermediary in handling problems. We maintain strict confidentiality in all grievance matters, and no one should hesitate to come to us."

Personnel also can help when an employee's problems are of a more personal nature. "We are able to give employees assistance in such areas as family, health, and legal problems; emotional disorders; and substance abuse," says Pamela Taylor, project specialist.

Confidential counseling and referral to sources of specialized assistance either inside or outside the hospital are offered. Taylor says, "Although some employees are referred to us by their supervisors when problems begin to affect their work performance, we'd like them to come to us earlier, when the problem begins. We try to make the counseling as personal and confidential as possible and choose the appropriate referrals on a case-by-case basis."

To improve employee communications, Personnel sponsors the annual night employees meeting, giving those who work the night shift a chance to discuss their concerns with top management. Periodic updates for first-line supervisors inform them of current hospital issues.

Employee recognition programs such as the service awards coffee hours and annual service awards dinner are organized by Personnel, as are the Christmas party and Christmas and Thanksgiving dinners, in cooperation with Dietary. Recreation and leisure activities – such as discount theater and sports tickets, weekend and vacation trips, and special staff discounts to local attractions – are arranged by the employee activities section.

The many employee benefits offered through the department will be discussed in a future issue of PULSE.

NEDH in the news

Deaconess personnel in the news during the past several months include:

- Michael Greenwald, M.D., dermatologist, discussed surgery of the skin and new innovations in skin care on WBZ radio's Larry Glick show.
- Jerome Groopman, M.D., hematologist/oncologist, and two of his patients were interviewed as part of a program on AIDS for "Chronicle" on Channel 5 in Boston. Groopman also discussed AIDS research on news programs of the Cable News Network and Boston Channels 2, 4, and 56.
- Roger Jenkins, M.D., director of the liver transplant unit, was interviewed by the Canadian Broadcasting Corporation regarding a transplant done on a Canadian child at Children's Hospital.
- Paul Hans, M.D., psychiatrist, spoke on dealing with holiday depression on radio stations WORC and WCOD.
- Charles Trey, M.D., chief of gastroenterology, discussed liver disease on Channel 56's "New England Today."

Deaconess Pursuit

M What are platelets?

H In what year was New England Deaconess Hospital founded?

F School of Nursing students receive credits from what college or university?

P A full-time employee with eight years of service is entitled to how many weeks of vacation?

M What does EEG stand for?

H Before the Meissner Building was constructed, where were the Pathology labs located?

F What is the Deaconess Hospital's zip code?

P How much do employees pay to participate in the basic group life insurance plan?

M What is the process of preventing the rejection of transplanted organs called?

H How many beds did the original Deaconess Hospital on Massachusetts Avenue have?

F What essential substance is contributed by more than 2,000 volunteers yearly at NEDH?

P How many paid holidays are observed at the Deaconess?

M What will soon surpass breast cancer as the leading cancer killer of women?

H Who called the first NEDH foot room a "beauty parlor for diabetic feet"?

F Which two structures in the NEDH complex are not accessible by indoor connections?

P For what three reasons may an employee be granted a paid leave of absence?

M What is the common term for a myocardial infarction?

H Who is the "Lady of the Lamp" depicted on the Deaconess logo?

F What electronic device is used by almost 500 Deaconess people as an aid to communication?

P Where can information on hospital-sponsored trips and recreational activities be picked up?

M What is the only known cure for primary biliary cirrhosis?

H Who founded the Friends of the Deaconess more than fifty years ago?

F What does MATEP stand for?

P In a year, how much tuition will the hospital reimburse a full-time employee for job-related courses?

M What organ produces insulin in the healthy body?

H To what church did the eight founding Deaconesses belong?

F What does ODISY stand for?

P Where is the employee health clinic currently located?

M Which of the following is not a diagnostic radiology procedure — CAT, SPECT, JCRT, MRI?

H Where at the Deaconess did the first administration of insulin in New England take place?

F How many telephones are there at NEDH?

P How much would an employee pay for an annual physical at the employee health clinic?

M Kaposi's sarcoma, a rare skin tumor, and unusual infections are symptoms of what disease?

H What building was for many years the site of the School of Nursing?

F What is the name of the NEDH pharmacy's drug distribution system?

P What is the minimum time that permanent job openings within the hospital are posted?

M What organ does the term renal refer to?

H What is the oldest building in the NEDH complex?

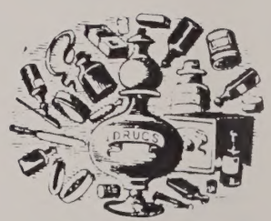
F What is the most popular meal in the NEDH cafeteria?

P How many employees were eligible to attend the 1984 Service Awards Dinner?

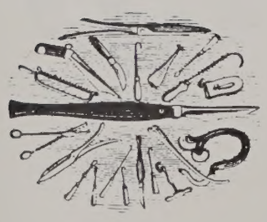
Led by a popular board game, the pursuit of trivia has become a national passion in recent years. In that spirit, the PULSE staff compiled a series of questions and answers to allow PULSE readers to test themselves on Deaconess-related information — some trivial, some not-so-trivial — in four categories:

- **M — medical information**
- **H — history of NEDH**
- **F — facts and figures**
- **P — personnel and benefits**

Answers may be found on the backs of the game cards.



Remember that answers are directly behind the questions. If the cards are not cut out, answers for questions in the right-hand column will appear on the left-hand side.



PULSE

M electroencephalogram, an examination of the electrical activity of the brain

H in the Palmer Building

F 02215

P nothing — the hospital pays for basic life insurance, roughly equal to an employee's annual base wage.

PULSE

M they are components of the blood that help control bleeding

H 1896

F Northeastern University

P four

PULSE

M lung cancer

H Elliott P. Joslin, M.D.

F Kennedy Hall — the School of Nursing — and the Pilgrim Road garage

P jury duty, military duty, death in the family

PULSE

M immunosuppression

H 14

F blood, donated in the Blood Bank

P eleven, including a floating holiday

PULSE

M a liver transplant

H Catherine Delano Grant

F Medical Area Total Energy Plant

P up to $700 per term or $2,000 per year

PULSE

M heart attack

H she is believed to be Florence Nightingale

F a "beeper"

P the Personnel Rack, Harris Hall basement

PULSE

M JCRT, which stands for Joint Center for Radiation Therapy

H Brodbeck Cottage, located on the site of the current Maintenance/Laundry building

F about 2,000

P there is no charge

PULSE

M the pancreas

H the Methodist Church

F On-line Deaconess Information System

P Baker 3

PULSE

M the kidney

H the Deaconess building — opened in 1907

F turkey BLT sandwich

P about 1,000

PULSE

M Acquired Immune Deficiency Syndrome (AIDS)

H Harris Hall

F unit dose system

P five working days

Employees honored for 25, 30 years of service

Dedication and caring characterize three Deaconess employees recently honored for their years of service to the hospital.

Ralph DeBernardo came to the Deaconess 30 years ago as a stockroom clerk. "I helped start the lab stockroom, which began as a separate area from the main stockroom," he says.

DeBernardo spent 22 years in the stockroom, becoming head stockroom manager, until he saw an opportunity to move into the pathology labs as a lab aide. Today as technical assistant in the histology lab, he is responsible for filing glass microscopic slides and paraffin blocks containing lab specimens. Occasionally, if a member of the technical staff is absent, DeBernardo helps out staining and coverslipping slides.

Ralph DeBernardo files glass specimen slides in the histology lab.

When asked his feelings about the Deaconess, DeBernardo says, "The fact that I've been here so long speaks for itself."

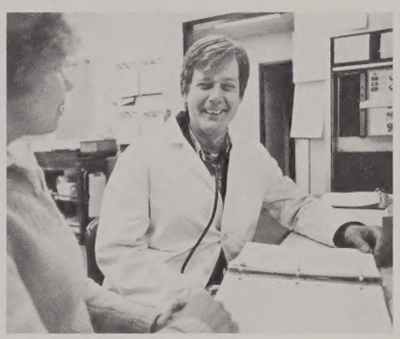
Nursing assistant Selma Berman has been here for 25 years. She was the first floating aide, moving from floor to floor. Now she works regularly in the progressive cardiac unit on Farr 3.

"I do the regular bedside nursing, making the patient comfortable in bed or in a chair," she says. "I work part time in the mornings, when things are busiest."

Berman says, "It's the little things that are important, the TLC. I always carry little personal items for patients — like hairnets or ribbons — to help perk them up. I like the work, and I like the feedback you get from patients — the fact that you can come into the room and make them feel better. As long as I can move, I'll keep working."

Norman Ricard, L.P.N., has spent 25 years in medical/surgical nursing. "I started as an orderly on Deaconess 4 North, responsible for one room with six chest surgery patients," he says. "I worked nights with the nursing students. I'd had five years experience nursing in the Air Force, but I learned the Deaconess way from the students. They had the theory, and I had the practical experience.

Nursing assistant Selma Berman helps make patients more comfortable.



Norman Ricard, L.P.N., consults with Susan Dwyer, L.P.N., at the Farr 7 nursing station.

"At the Deaconess, everyone is special," Ricard says. "I don't think I would have stayed so long anywhere else. No matter how many new medicines and machines come along, the basis of nursing will never change — treating your patients with respect, humor, and love."

Liver transplantation program highlights annual meeting

The 1985 annual meeting of NEDH Corp., the parent company of New England Deaconess Hospital, was held on January 15 at the Museum of Fine Arts, Boston. More than 175 members of the corporation, physicians, and hospital administrators attended.

Highlighting the business meeting was a film on liver transplantation, created by the NEDH Training Department, and a presentation by Roger L. Jenkins, M.D., director of the Deaconess liver transplant unit. Jenkins said, "One of the most important things liver transplantation has done for us is to give us a sense of camaraderie. It has brought all of us — physicians, surgeons, anesthesiologists, nurses, lab techs, everybody — closer together than ever. And that team spirit can only strengthen the care of our patients."

Several transplant patients attended the meeting and participated in the presentation. Edythe Trautz, who received a liver transplant at the Deaconess in August, 1983, said, "I don't think I have ever met anyone at the Deaconess — no matter what their position — that I could find anything to not like about. They're all so very, very dedicated, and I've never seen that in any of the many hospitals I've been in."

Also at the meeting, three new directors were elected to the corporation: Frank H. Brenton, president of Marshall's; Richard A. Butler Jr., president of Butler Automatic, Inc.; and John P. Hamill, president of Shawmut Corporation, who also was named a corporator. Other new corporators include Michael J. Babcock, president of Filene's; George H.A. Clowes Jr., M.D., NEDH Department of Surgery; Harold Hestnes, partner at Hale and Dorr; Charles Lee, Boston Financial Technology, Inc.; Henry E. Russell, retired chairman of SCA Services; J. Dale Sherratt, president of Kendall Co.; and R. Gregg Stone, associate at Hemenway and Barnes. Cornelius E. Sedgwick, M.D., and James F. Farr were named honorary directors.

Jane A. Tilley, president of the Friends of the Deaconess, presented NEDH Corp. with a check for $65,772. That money will be used to renovate the Patient Service area on Farr 1.

A reception and tour of the museum's Asiatic Wing, and dinner in the Fine Arts restaurant followed the business meeting.

Stat Lab

(continued from page 1)

Telautographs are located in the surgical suites where there are no computer terminals.

The stat lab does not offer every test available in the main lab, since the information provided by some tests is not needed on a stat basis. However, Donna Walsh, M.T. (A.S.C.P.), the chemistry supervisor responsible for the stat lab, says, "Compared to other hospitals we have one of the most comprehensive lists of stat tests."

During the day the stat lab is staffed by technologists on rotation from the main chemistry and hematology labs. The stat lab also operates at night, the only lab to do so, processing emergency specimens and those taken during liver transplants which are usually done at night.

Roger Jenkins, M.D., director of the liver transplant unit, says, "Our patients need round-the-clock monitoring, and their condition can change very quickly. The stat lab handles such a large volume of samples with a very rapid turnaround — they are so dependable that sometimes we take them for granted. But I know I couldn't do without them."

Walsh says, "The people who work here know these tests are used for immediate decisions regarding direct patient care. They're capable of putting out a 100 percent effort over a sustained period of time."

Moving? We'd like to know

Because the post office does not forward third-class mail, we need your help in keeping the PULSE list accurate. If you are moving, please inform the NEDH Public Relations Department, 185 Pilgrim Road, Boston, Massachusetts 02215, (617) 732-8046. It would be helpful if you could send your PULSE address label. NEDH employees should inform their supervisors of changes of address.

news in brief

Mario Baldini, M.D., hematologist, co-authored a paper on direct imaging of living human platelets by flash x-ray microscopy, published in the journal *Science*.

Richard J. Baptista, M.S., R.Ph., manager of Deaconess Home Health Care Corporation, has been appointed to the select committee on professional standards of the American Society of Parenteral and Enteral Nutrition and to the editorial advisory board of *NSS Today*.

William Branson, patient service manager, received the first Pioneer Award given by the Massachusetts Association of Patient Account Managers for his many contributions to the organization.

Gail L. Brown, M.D., oncologist, has joined the Department of Medicine.

George H.A. Clowes Jr., M.D., director of surgical metabolism, was visiting professor at the Maryland Institute for Emergency Medical Services Systems and presented a paper at the International Workshop on Interleukin-1 hosted by the Arthritis and Rheumatism Council/British Society for Rheumatology.

John R. Delfs, M.D., neurologist, has joined the Department of Medicine and will be associate director of the Wm. P. Arnold Pain Treatment and Research Center.

F. Henry Ellis, M.D., chief of cardiothoracic surgery, has been named president-elect of the Boston Surgical Society. He also presented the first Cross-Jones Lecture at St. Luke's Hospital in Cleveland, speaking on surgical management of gastroesophageal reflux stricture.

Robert G. Frykberg, D.P.M., podiatrist, has been named president of the Massachusetts Podiatric Medical Society.

Michael Greenwald, M.D., dermatologist, spoke on "Saving Face Without Risk" at Brandeis University.

Jerome Groopman, M.D., hematologist/oncologist, co-authored an article published in *The Lancet* showing that people can carry the HTLV-III virus, the probable cause of AIDS, without producing detectable antibodies to the virus. Groopman and **Carl J. O'Hara, M.D.,** pathologist, co-authored an article on HTLV-III infection of the brain in people with AIDS-associated encephalopathy, published in *Science*.

Jon E. Gudeman, M.D., psychiatrist, received a citation for outstanding performance from the Commonwealth of Massachusetts Department of Mental Health for his contributions to the development of mental health services for seriously ill patients.

Karim Hamawy, research associate in the nutrition metabolism laboratory, received the 1985 Harry Vars Award for basic science from the American Society of Parenteral and Enteral Nutrition.

Jack Hawiger, M.D., chief of experimental medicine, was recently elected vice-chairman of the council on thrombosis of the American Heart Association (AHA) at its annual meeting. He also chaired a session on blood platelets and spoke to a symposium on platelet membranes at the AHA's Sixth National Conference on Thrombosis. Also presenting papers at the conference were research associates **Marek Kloczewiak, Ph.D.,** and **Sheila Timmons**.

Faith Kaplan, medical technologist, tissue typing lab, presented a paper on T-cell subset analysis of patients with protein-calorie malnutrition at the annual meeting of the American Society for Histocompatibility and Immunogenetics.

Robert Lees, M.D., chief of peripheral vascular disease, presented cardiovascular grand rounds on the imaging of arterial lesions with radiolabeled lipoproteins at the Children's Hospital in Boston.

Laurens MacLure, president, participated in a panel discussion on the public health implications of organ transplants, sponsored by the Massachusetts Public Health Association.

Anthony P. Monaco, M.D., chief of the division of organ transplantation, was named president-elect of the Massachusetts Chapter of the American College of Surgeons.

Cherie Moore, R.N., oncology nurse, spoke on solving problems of peripheral access to a meeting of nurses in Fall River, Massachusetts; and on care and complications of venous access ports to the New England chapter of the National Intravenous Therapy Association.

Richard Rohrer, M.D., surgeon, has joined the Department of Surgery and will work in the division of organ transplantation on the development of clinical pancreas transplantation.

Joseph J. Schildkraut, M.D., psychiatrist, gave the Paul Schilder Memorial Lecture on biochemical discrimination of depressive disorders at the New York University Medical Center. Schildkraut also co-authored a chapter on the biochemical aspects of affective disorders in the *Comprehensive Textbook of Psychiatry/IV*, published by Williams and Wilkins.

Miles F. Shore, M.D., chief of psychiatry, has been elected to the governing council of the psychiatric services section of the American Hospital Association. He also spoke on managing health services in difficult times to the Yale University School of Management Health Care Colloquium.

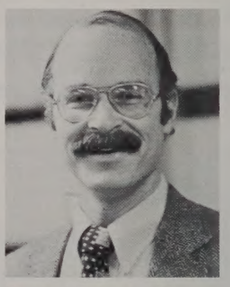
Alison Sneider, director of public relations, spoke on patients, technology, and the media to the New England Chapter of the American Association of Medical Writers.

Cynthia Taft-Bayerl, R.D., M.S., coordinator of ambulatory dietetic services, served as a panelist for teleconferences on premenstrual syndrome and on eating disorders, sponsored by the National University Teleconference Network.

Julie White, R.N., nurse epidemiologist, has been named chairman of the local chapters advisory committee of the Association of Practitioners in Infection Control.

New Staff Members

John R. Delfs, M.D.



Richard Rohrer, M.D.

Stat lab provides rapid results (see page 1)

A rush specimen arrives at the stat lab in a pneumatic tube.

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